Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 1 of 49

| Fill in this information to identify your case: | | |
|-------------------------------------------------|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself | | | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------|--|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | |
| 1. | Your full name | | | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Robert First name H Middle name Jenkins Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) | | | | |
| 2. | All other names you have used in the last 8 years | | | | | | |
| | Include your married or maiden names. | | | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-6186 | | | | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 2 of 49

Case number (if known)

Debtor 1 Robert H Jenkins

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) | | | |
| | EINs | EINs | | | |
| Where you live | 8155 Ogden Ave, Apt 10 | If Debtor 2 lives at a different address: | | | |
| | Lyons, IL 60534 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | County | County | | | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| Why you are choosing this district to file for pankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | Employer Identification Jumbers (EIN) you have used in the last 8 years include trade names and doing business as names. Where you live Why you are choosing this district to file for | Any business names and imployer Identification thumbers (EIN) you have used in the last 8 years include trade names and doing business as names Business name(s) Business name(s) EINS Where you live 8155 Ogden Ave, Apt 10 Lyons, IL 60534 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. | | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 3 of 49

Case number (if known) Debtor 1 Robert H Jenkins

| art | Tell the Court About | Your Ba | ankruptcy Ca | se | | | | | |
|-----|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------------------|-----------------------------------------|--------------------------|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ☐ Ch | napter 7 | | | | | | |
| | | ☐ Ch | napter 11 | | | | | | |
| | | ☐ Ch | napter 12 | | | | | | |
| | | ■ Ch | napter 13 | | | | | | |
| 3. | How you will pay the fee | | check with the clerk's office in your loca ee yourself, you may pay with cash, can behalf, your attorney may pay with a c | shier's check, or money | | | | | |
| | | | | | stallments. If you choose this ts (Official Form 103A). | option, sign and attach the Application | for Individuals to Pay | | |
| | | | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line to applie to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | | | |
| | | | | | | | | | |
| Э. | Have you filed for bankruptcy within the last 8 years? | ■ No | | | | | | | |
| | lust o yours. | □ 1e | s. District | | When | Case number | | | |
| | | | District | | When When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | odde namber | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Ye | S. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if know | wn | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if know | wn | | |
| 11. | Do you rent your residence? | ■ No | . Go to li | ine 12. | | | | | |
| | residence: | ☐ Ye | s. Has yo | ur landlord obt | ained an eviction judgment a | gainst you and do you want to stay in y | our residence? | | |
| | | | | No. Go to line | 12. | | | | |
| | | | | Yes. Fill out Ir bankruptcy pe | | ction Judgment Against You (Form 101) | A) and file it with this | | |
| | | | | | | | | | |

| | | Document | Page 4 01 49 | |
|----------|------------------|----------|------------------------|--|
| Debtor 1 | Robert H Jenkins | | Case number (if known) | |

| ar | Report About Any Bu | sinesses | You Own | as a Sole Proprie | tor | | | | | |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to I | Part 4. | | | | | | |
| | | ☐ Yes. | Name | and location of bus | siness | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | | | | |
| | If you have more than one sole proprietorship, use a | | Numbe | Number, Street, City, State & ZIP Code | | | | | | |
| | separate sheet and attach it to this petition. | | Check | the appropriate bo | ox to describe your business: | | | | | |
| | • | | | | ness (as defined in 11 U.S.C. § 101(27A)) | | | | | |
| | | | | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | | | |
| | | | | None of the above | e | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | | | | |
| | For a definition of small | ■ No. | I am n | ot filing under Chap | oter 11. | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fil Code. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | | |
| | | ☐ Yes. | I am fil | ling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| Part | 4: Report if You Own or | Have Any | Hazardo | us Property or An | y Property That Needs Immediate Attention | | | | | |
| | Do you own or have any | | Trazar ao | uo 1 10porty 01 7111 | , report, rua resuc immounte rue income | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is t | he hazard? | | | | | | |
| identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | | ate attention is why is it needed? | | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | Number Circus City Chate 9 7 in Code | | | | | |
| | | | | | Number, Street, City, State & Zip Code | | | | | |

Debtor 1 Robert H Jenkins Document Page 5 of 49 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Filed 07/06/16 Case 16-21779 Doc 1 Entered 07/06/16 14:37:36

Desc Main Document Page 6 of 49 Case number (if known) Debtor 1 Robert H Jenkins Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert H Jenkins Signature of Debtor 2 Robert H Jenkins Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on July 6, 2016

MM / DD / YYYY

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 7 of 49

Debtor 1 Robert H Jenkins Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Thomas | G. Stahulak | Date | July 6, 2016 | | | | |
|--------------------------------------------------------|------------------------|--------------|-------------------------------|--|--|--|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | | | | |
| Thomas G. Stahulak | | | | | | | |
| Printed name Stabulak & Associates J. J. C. / CotEilad | | | | | | | |
| Stahulak & Associates, L.L.C. / GetFiled Firm name | | | | | | | |
| 53 W. Jacks | son Blvd., Suite 652 | | | | | | |
| Chicago, IL | 60604 | | | | | | |
| Number, Street, 0 | City, State & ZIP Code | | | | | | |
| Contact phone | (312) 662-1480 Er | nail address | ecf@stahulakandassociates.com | | | | |
| 6288620 | | | | | | | |
| Bar number & Sta | ate | | | | | | |

| | | DOCUM | <u>-ni Pane 8 ni 49</u> | |
|-----------------------------------------|-------------------------|-------------------|-------------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Robert H Jenkins | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 18.713.00 1c. Copy line 63, Total of all property on Schedule A/B..... 18,713.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 12.199.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 81,731.00 Your total liabilities 93.930.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 3,234.88 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2,749.88 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Case 16-21779 Document

Page 9 of 49
Case number (if known) Debtor 1 Robert H Jenkins

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,633.33 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clain | 1 |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | | Document | Page 10 of 49 | | | |
|---------------|--------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------|----------------------------------------|--|
| Fill in | this inform | nation to identify your | case and this filing: | | | | |
| Debtor | r 1 | Robert H Jenkins | | | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debtor | | First Name | Middle Name | LastName | | | |
| (Spouse | , if filing) | First Name | Middle Name | Last Name | | | |
| United | States Bar | kruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | | | |
| Case r | number | | | | | ☐ Check if this is an | |
| Ouco i | | | | | | amended filing | |
| | | | | | | · · | |
| ∪ π: - | .: | 100 A /D | | | | | |
| - | | rm 106A/B | | | | | |
| Sch | redule | e A/B: Prop | erty | | | 12/15 | |
| hink it i | fits best. Be tion. If more | as complete and accura space is needed, attach | e items. List an asset only once. ate as possible. If two married peo a separate sheet to this form. On | ople are filing together, both ar | e equally responsible fo | or supplying correct | |
| Answer | every quest | ion. | | | | | |
| Part 1: | Describe E | Each Residence, Building | g, Land, or Other Real Estate You | Own or Have an Interest In | | | |
| 1 Do v | ou own or h | ave any legal or equitable | e interest in any residence, buildi | ing land or similar property? | | | |
| i. Do y | ou own or m | ave any legal of equitable | e interest in any residence, build | ng, lana, or similar property . | | | |
| ■ No | o. Go to Part | 2. | | | | | |
| ☐ Ye | es. Where is | the property? | | | | | |
| Part 2: | Doscribo V | our Vehicles | | | | | |
| rait 2. | Describe | Tour Vernicles | | | | | |
| | | | uitable interest in any vehicle | | | y vehicles you own that | |
| someor | ne else driv | es. If you lease a vehic | le, also report it on Schedule G | : Executory Contracts and Ur | nexpired Leases. | | |
| 3. Cars | s, vans, tru | cks, tractors, sport ut | tility vehicles, motorcycles | | | | |
| п., | | | | | | | |
| □ N | - | | | | | | |
| Y | es | | | | | | |
| | | loon | | | Do not deduct secure | ed claims or exemptions. Put | |
| | | eep | | the property? Check one | the amount of any se | cured claims on Schedule D: | |
| | | Compass | Debtor 1 only | | Creditors Who Have Claims Secured by Prop | | |
| | Year: 2 Approximate | 2011 | Debtor 2 only Debtor 1 and Debtor | r O amb | Current value of the entire property? | Current value of the portion you own? | |
| | Other inform | | At least one of the d | • | chare property: | portion you own. | |
| Γ | | | — At least one of the d | cotors and another | | | |
| | | | ☐ Check if this is con | nmunity property | \$11,775.0 | 0 \$11,775.00 | |
| L | | | (see instructions) | | | | |
| | | | | | | | |
| 4. Wat | ercraft, air | craft, motor homes, A | TVs and other recreational ve | ehicles, other vehicles, and | accessories | | |
| Exar | mples: Boat | s, trailers, motors, pers | onal watercraft, fishing vessels, | snowmobiles, motorcycle ac | ccessories | | |
| ■ N | 0 | | | | | | |
| | | | | | | | |
| Ц 1 | es | | | | | | |
| | | | | | | | |
| 5 Add | d the dollar | r value of the nortion | you own for all of your entries | s from Part 2 including an | / entries for | | |
| | | | . Write that number here | | | \$11,775.00 | |
| | | | | | L | | |
| Part 3: | Describe \ | our Personal and Hous | ehold Items | | | | |
| Do yo | u own or h | ave any legal or equit | able interest in any of the foll | owing items? | | Current value of the | |
| | | | | | | portion you own? Do not deduct secured | |
| | | | | | | claims or exemptions. | |
| | | ods and furnishings | linana ahira litahaania | | | | |
| ⊏X∂ | arripies. IVIaj | or appliances, furniture | , linens, china, kitchenware | | | | |

□ No
Official Form 106A/B
Schedule A/B: Property

| | Case 16- | 21779 | DOC 1 | Filed 0 Docui | 7/06/16 ment | | rea 07/0 11 of 49 | | 4:37:36 | Desc Main | |
|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------|--------------------|------------------|-----------------|--------------|----------------------|-------------|----------------|--------------------------------|------|
| Debtor 1 | Robert H Jer | nkins | | | | | _ | Case num | nber (if knowr | n) | |
| ■ Ye | s. Describe | | | | | | | | | | |
| | | Used pe | rsonal hou | sehold furn | iture and ç | goods/iten | ns | | | \$2,00 | 0.00 |
| ■ No | nples: Televisions a including cel | | | | | pment; con | nputers, prin | nters, scar | nners; music | collections; electronic device | ces |
| Exan | other collecti | | | | artwork; boo | oks, picture | es, or other a | art objects | s; stamp, coi | n, or baseball card collectio | ns; |
| | | 400 Boo | ks | | | | | | | \$50 | 0.00 |
| Exan No □ Ye 10. Firea Exa ■ No □ Ye 11. Clott Exa □ No | musical instr | ographic, ex ruments s, shotguns | ercise, and o | n, and related | d equipmen | ıt | | golf clubs, | skis; canoe | s and kayaks; carpentry too | ls; |
| | | Used pe | rsonal clot | hing and ac | cessories | | | | | \$3,00 | 0.00 |
| ■ No □ Ye 13. Non Exa ■ No □ Ye 14. Any | mples: Everyday je ss. Describe farm animals mples: Dogs, cats, ss. Describe other personal an | birds, horse | es old items yo | | | | · | ŕ | , 0 | , gold, silver | |
| | d the dollar value Part 3. Write that | | | | | | | you have | attached | \$5,500.0 | 0 |
| Part 4: | Describe Your Finan | ıcial Assets | | | | | | | | | |
| Do you | own or have any I | egal or equ | ıitable inter | est in any o | f the follow | /ing? | | | | Current value of th | ie |

portion you own?
Do not deduct secured claims or exemptions.

Document Page 12 of 49 Debtor 1 Case number (if known) Robert H Jenkins 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$30.00 Cash on hand 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Chase Bank \$100.00 17.1. Checking Chase Bank \$205.00 Checking 17.2. Chase Bank \$1,100.00 17.3. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: 401(k) Retirement plan through Employer - NO CASH \$1.00 SURRENDER VALUE 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. Security Deposit with landlord - \$875.00 - NO \$1.00 Rental deposit CASH SURRENDER VALUE

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

Case 16-21779

Doc 1

Filed 07/06/16

Entered 07/06/16 14:37:36

Desc Main

| | | Case 16 | 6-21779 | Doc 1 | Filed 07/06/16 | | Desc Main |
|----|-----------------|---------------------------------------------------|-----------------------------------|------------------------------|------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------------------------|
| De | btor 1 | Robert H J | enkins | | Document | Page 13 of 49 Case number (if known) | |
| | ☐ Yes | | Issuer name | and descripti | on. | | |
| | 26 U.S.C | | ation IRA, in a), 529A(b), ar | | n a qualified ABLE pro | ogram, or under a qualified state tuition pro | gram. |
| | ■ No □ Yes | | Institution na | me and desc | ription. Separately file th | ne records of any interests.11 U.S.C. § 521(c): | |
| | ■ No | - | future intere | | rty (other than anythin | g listed in line 1), and rights or powers exe | rcisable for your benefit |
| | Example ■ No | les: Internet d | | s, websites, p | ts, and other intellecturoceeds from royalties a | aal property and licensing agreements | |
| | Example ■ No | les: Building p | s, and other opermits, exclusion | sive licenses | | n holdings, liquor licenses, professional licens | es |
| Mo | oney or p | oroperty owe | d to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | unds owed to | | oout them, inc | luding whether you alre | ady filed the returns and the tax years | |
| | ■ No | les: Past due | or lump sum a | | usal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| | Examp | <i>les:</i> Unpaid w | unpaid loans | ty insurance p | payments, disability ben someone else | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | | t s in insuran d <i>les:</i> Health, di | | e insurance; h | ealth savings account (| HSA); credit, homeowner's, or renter's insurar | nce |
| | Yes. N | Name the insu | | iny of each po pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| | | | Emp | | nce Policy through 000.00 - NO CASH 'ALUE | | \$1.00 |
| | If you a someor | re the benefic ne has died. | ciary of a living | | someone who has die t proceeds from a life in | ed surance policy, or are currently entitled to rece | eive property because |
| | ⊔ Yes. | Give specific | information | | | | |
| | | | | | you have filed a lawsui surance claims, or rights | it or made a demand for payment s to sue | |

| | Case 16-21779 | Doc 1 | Filed 07/06/16 | Entered 0 | 7/06/16 14:37:36 | Desc Main |
|----------------|-----------------------------------------------------------------------|--------------------|----------------------------|------------------------|------------------------------|------------------|
| Debte | or 1 Robert H Jenkins | | Document | Paye 14 01 | 49 Case number (if known) | |
| | Yes. Describe each claim | | | | | |
| 34. O | ther contingent and unliquidat | ed claims of | every nature, includin | g counterclaims | of the debtor and rights to | set off claims |
| | No | | | | | |
| | Yes. Describe each claim | | | | | |
| 35. A | ny financial assets you did not | already list | | | | |
| | No | | | | | |
| | Yes. Give specific information | | | | | |
| | Add the dollar value of all of yo for Part 4. Write that number ho | | | | | \$1,438.00 |
| Part 5 | : Describe Any Business-Related | Property You | Own or Have an Interest | In. List any real esta | ate in Part 1. | |
| 37. D c | you own or have any legal or equi | itable interest in | n any business-related p | roperty? | | |
| | No. Go to Part 6. | | | | | |
| | es. Go to line 38. | | | | | |
| | | | | | | |
| Part 6 | Describe Any Farm- and Comme If you own or have an interest in fa | | | n or Have an Interes | st In. | |
| 46. D | o you own or have any legal or | r equitable int | terest in any farm- or | commercial fishir | ng-related property? | |
| I | No. Go to Part 7. | | | | | |
| | Yes. Go to line 47. | | | | | |
| | | | | | | |
| Part 7 | Describe All Property You | Own or Have a | n Interest in That You Did | d Not List Above | | |
| | o you have other property of a | | | | | |
| | Examples: Season tickets, country No | y club membe | rsnip | | | |
| | Yes. Give specific information | | | | | |
| | · | | | | I | |
| 54. | Add the dollar value of all of yo | our entries fro | om Part 7. Write that n | umber here | | \$0.00 |
| | | | | | ' | |
| Part 8 | List the Totals of Each Part | of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | | \$0.00 |
| | Part 2: Total vehicles, line 5 | | | \$11,775.00 | | |
| | Part 3: Total personal and hous | | , line 15 | \$5,500.00 | | |
| | Part 4: Total financial assets, li | | | \$1,438.00 | | |
| | Part 5: Total business-related p | | | \$0.00 | | |
| | Part 6: Total farm- and fishing- | | | \$0.00 | | |
| 61. | Part 7: Total other property not | ı nateu, iille Ə | * <u> </u> | \$0.00 | | |
| 62. | Total personal property. Add lir | nes 56 through | n 61 | \$18,713.00 | Copy personal property to | otal \$18,713.00 |
| 63. | Total of all property on Schedu | ıle A/B. Add li | ne 55 + line 62 | | | \$18,713.00 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Robert H Jenkins | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | he Amount of the exemption you claim | | Specific laws that allow exemption | |
|----------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------|-----------------------------------------------------------------|------------------------------------|--|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| Used personal household furniture and goods/items | \$2,000.00 | | \$2,000.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 400 Books Line from Schedule A/B: 8.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | |
| Life from Schedule AVD. C. I | | | 100% of fair market value, up to any applicable statutory limit | | |
| Used personal clothing and accessories Line from Schedule A/B: 11.1 | \$3,000.00 | | \$3,000.00 | 735 ILCS 5/12-1001(a) | |
| Enterior constant 772. TT. | | | 100% of fair market value, up to any applicable statutory limit | | |
| Cash on hand Line from Schedule A/B: 16.1 | \$30.00 | | \$30.00 | 735 ILCS 5/12-1001(b) | |
| Elle from <i>Generalie PVB</i> . 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Checking: Chase Bank Line from Schedule A/B: 17.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| Line nom <i>denedale PVD</i> . 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 16 of 49

Robert H Jenkins Case number (if known)

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking: Chase Bank 735 ILCS 5/12-1001(b) \$205.00 \$205.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Savings: Chase Bank 735 ILCS 5/12-1001(b) \$1,100.00 \$1,100.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 401(k): Retirement plan through 735 ILCS 5/12-1006 \$1.00 \$1.00 **Employer - NO CASH SURRENDER** VALUÉ 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 21.1 Rental deposit: Security Deposit with 735 ILCS 5/12-1001(b) \$1.00 \$1.00 landlord - \$875.00 - NO CASH SURRENDER VALUE 100% of fair market value, up to Line from Schedule A/B: 22.1 any applicable statutory limit Term Life Insurance Policy through 215 ILCS 5/238 \$1.00 \$1.00 Employer - \$20,000.00 - NO CASH SURRENDER VALUE 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 31.1 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Debtor 1

| | 16-21/79 | Doc 1 Filed 07/06/16 Document | Page 17 | ′∩ f | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------|-------------------|
| Fill in this informatio | n to identify you | | 1 1 1 1 1 1 1 1 | ·// ./ | | |
| Debtor 1 R | obert H Jenkin | S | | | | |
| | rst Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) Fin | rst Name | Middle Name | Last Name | | | |
| | | | | | | |
| United States Bankrup | otcy Court for the | NORTHERN DISTRICT OF ILL | LINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | _ | if this is an |
| | | | | | amend | ded filing |
| Official Form 10 | 06D | | | | | |
| | | Who Have Claims | Secureo | hy Propert | V | 12/15 |
| | | | | <u> </u> | <u> </u> | |
| | | If two married people are filing togeth out, number the entries, and attach it | | | | |
| number (if known). | | | | | | |
| . Do any creditors have | | | | | | |
| ☐ No. Check this | box and submit t | his form to the court with your other | schedules. Yo | ou have nothing else t | o report on this form. | |
| Yes. Fill in all o | f the information | below. | | | | |
| Part 1: List All Sec | cured Claims | | | | | |
| | | | | | | |
| | | more than one secured claim, list the cre | | Column A | Column B | Column C |
| for each claim. If more th | nan one creditor has | a particular claim, list the other creditor | s in Part 2. As | Column A Amount of claim Do not deduct the | Value of collateral | Unsecured |
| for each claim. If more th much as possible, list the | nan one creditor has | s a particular claim, list the other creditor cal order according to the creditor's nam | rs in Part 2. As ne. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 | nan one creditor has | s a particular claim, list the other creditor cal order according to the creditor's nam Describe the property that secures | the claim: | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| for each claim. If more the much as possible, list the control of | nan one creditor has claims in alphabeti | s a particular claim, list the other creditor cal order according to the creditor's nam | the claim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 | nan one creditor has claims in alphabeti | s a particular claim, list the other creditor cal order according to the creditor's nam Describe the property that secures 2011 Jeep Compass 46,000 r | the claim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champa | ean one creditor has claims in alphabeti cy/Member aign Ave | s a particular claim, list the other creditor cal order according to the creditor's nam Describe the property that secures | the claim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankrupto Services | ean one creditor has claims in alphabeti cy/Member aign Ave | s a particular claim, list the other creditor cal order according to the creditor's nam Describe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: | the claim: | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champa | ean one creditor has claims in alphabeti cy/Member aign Ave | s a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. | s in Part 2. As ne. the claim: miles | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankrupto Services 200 E Champa Rantoul, IL 618 Number, Street, City, S | exy/Member sign Ave 866 State & Zip Code | s a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed | s in Part 2. As ne. the claim: miles | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, S | exy/Member sign Ave 866 State & Zip Code | s a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. | the claim: miles Check all that | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, street, City, street Debtor 1 only | exy/Member sign Ave 866 State & Zip Code | By a particular claim, list the other creditor cal order according to the creditor's name according to the claim is: As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as | the claim: miles Check all that | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, street, City, street Debtor 1 only Debtor 2 only | ey/Member aign Ave 366 State & Zip Code Check one. | s a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) | s in Part 2. As ne. the claim: miles Check all that | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, S Who owes the debt? Or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | exy/Member sign Ave 366 State & Zip Code Check one. | as a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me | s in Part 2. As ne. the claim: miles Check all that | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankrupto Services 200 E Champa Rantoul, IL 618 Number, Street, City, 3 Who owes the debt? (Debtor 1 only Debtor 2 only At least one of the delighter the much as possible to the more than 10 on the much as possible to the much as possible, list the much as possible to the much as pos | exy/Member aign Ave 366 State & Zip Code Check one. | as a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit | the claim: miles Check all that mortgage or secuchanic's lien) | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, S Who owes the debt? Or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | exy/Member aign Ave 366 State & Zip Code Check one. | as a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me | the claim: miles Check all that mortgage or secuchanic's lien) | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, 3 Who owes the debt? Or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del | exy/Member aign Ave 366 State & Zip Code Check one. | as a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit | the claim: miles Check all that mortgage or secuchanic's lien) | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, 3 Who owes the debt? Or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del | exy/Member exy/Member aign Ave 366 State & Zip Code Check one. | as a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit | the claim: miles Check all that mortgage or secuchanic's lien) | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |
| for each claim. If more the much as possible, list the 2.1 Credit Union 1 Creditor's Name Attn:Bankruptor Services 200 E Champar Rantoul, IL 618 Number, Street, City, 3 Who owes the debt? Or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the del | exp/Member exp/Member aign Ave 366 State & Zip Code Check one. 2 only btors and another elates to a Opened 10/15 Last Active | as a particular claim, list the other creditor cal order according to the creditor's name bescribe the property that secures 2011 Jeep Compass 46,000 r As of the date you file, the claim is: apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit | the claim: miles Check all that mortgage or secuchanic's lien) Purchase M | Amount of claim Do not deduct the value of collateral. \$12,199.00 | Value of collateral that supports this claim | Unsecured portion |

Add the dollar value of your entries in Column A on this page. Write that number here: \$12,199.00 If this is the last page of your form, add the dollar value totals from all pages. \$12,199.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | Document | Page 1 | 8 of 49 | |
|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Fill in thi | is information to identify your o | case: | | | |
| Debtor 1 | Robert H Jenkins | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | iling) First Name | Middle Name | Last Name | | |
| | | | | | |
| United S | tates Bankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | |
| Case nur (if known) | mber | | | | Check if this is an amended filing |
| | Form 106E/F ule E/F: Creditors W | ho Have Unsecured | Claims | | 12/15 |
| any execu Schedule (Schedule I left. Attach | tory contracts or unexpired leases G: Executory Contracts and Unexpi D: Creditors Who Have Claims Seci | that could result in a claim. Also li ired Leases (Official Form 106G). D ured by Property. If more space is r e. If you have no information to rep | st executory of not include needed, copy | Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property ((any creditors with partially secured cl the Part you need, fill it out, number the not file that Part. On the top of any | Official Form 106A/B) and on aims that are listed in e entries in the boxes on the |
| | y creditors have priority unsecured | | | | |
| ■ No | o. Go to Part 2. | | | | |
| ☐ Ye | es. | | | | |
| Part 2: | List All of Your NONPRIORIT | Y Unsecured Claims | | | |
| 3. Do an | y creditors have nonpriority unsec | ured claims against you? | | | |
| □ No | o. You have nothing to report in this pa | art. Submit this form to the court with | your other sch | edules. | |
| Ye | es. | | | | |
| unsec | sured claim, list the creditor separately one creditor holds a particular claim, li | for each claim. For each claim listed | , identify what t | holds each claim. If a creditor has mor ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill out | ly included in Part 1. If more |
| | | | | | Total claim |
| 4.1 | Amex | Last 4 digits of acc | ount number | 2913 | \$2,528.00 |
| (F | Ionpriority Creditor's Name Correspondence Po Box 981540 El Paso, TX 79998 | When was the debt | incurred? | Opened 10/15 Last Active 6/24/16 | |
| N | Jumber Street City State Zlp Code Who incurred the debt? Check one. | As of the date you f | file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| _ | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and and | _ ' | ITY unsecure | d claim: | |
| | ☐ Check if this claim is for a comm | Па | | | |
| | lebt s the claim subject to offset? | ☐ Obligations arisin report as priority clair | | ration agreement or divorce that you did | not |
| _ | No | <u>-</u> ' ' ' | | g plans, and other similar debts | |
| | ⊒ Yes | Other. Specify | • | | |
| | | - Othor. Opoony _ | | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 19 of 49

| Debto | or 1 Robert H Jenkins | | Case number (if know) | |
|-------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------|------------|
| 4.2 | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | 5102 | \$6,107.00 |
| | Po Box 8801 Wilmington, DE 19899 | When was the debt incurred? | Opened 03/13 Last Active 4/08/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other Specify Credit Card | | |
| 4.3 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 4330 | \$5,127.00 |
| | Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 07/10 Last Active 4/16/16 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □Yes | ■ Other. Specify Credit Card | | |
| 4.4 | Crdt Union 1 | Last 4 digits of account number | 6243 | \$7,872.00 |
| | Nonpriority Creditor's Name | | Opened 05/14 Last Active | |
| | 450 E. 22nd St. Suite 250 Lombard, IL 60148 | When was the debt incurred? | 3/25/16 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alata. | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | u Ciaiiii. | |
| | ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | manon agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □ Yes | Other Specify Credit Card | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 20 of 49

Debtor 1 Robert H Jenkins Case number (if know) 4.5 \$10,255.00 Discover Financial Last 4 digits of account number 9014 Nonpriority Creditor's Name Opened 10/14 Last Active Po Box 3025 When was the debt incurred? 4/01/16 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 Merrick Bank/Geico Card Last 4 digits of account number 0656 \$3,115.00 Nonpriority Creditor's Name Opened 09/12 Last Active Po Box 23356 When was the debt incurred? 4/26/16 Pittsburg, PA 15222 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.7 Prosper Marketplace Inc Last 4 digits of account number 3413 \$18,267.00 Nonpriority Creditor's Name Opened 09/15 Last Active Po Box 396081 5/09/16 When was the debt incurred? San Francisco, CA 94139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 21 of 49
Case number (if know)

| Debtor | 1 <u>F</u> | Robert H | l Je | nkins | | | Case n | umber (if know | v) | |
|--------------------------------------------|----------------------------------|----------------------------------------------------|-------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------|------------|
| 4.8 | | cial Sec | | y Administration or's Name | Last 4 digits of account num | ber | | | \$28 | 3,460.00 |
| | | O. Box 3 | | | When was the debt incurred | ? | | | | |
| - | | | | PA 19122 y State Zlp Code | As of the date you file, the cl | laim is | : Check | all that apply | | |
| | | | | e debt? Check one. | , | | | | | |
| | | Debtor 1 o | nly | | ☐ Contingent | | | | | |
| | | Debtor 2 o | nly | | ☐ Unliquidated | | | | | |
| | | Debtor 1 a | ınd [| Debtor 2 only | ☐ Disputed | | | | | |
| | | At least on | ne of | the debtors and another | Type of NONPRIORITY unse | cured | claim: | | | |
| | | | his | claim is for a community | ☐ Student loans | | | | | |
| | deb | | uhi | ect to offset? | Obligations arising out of a report as priority claims | separa | ation ag | reement or div | orce that you did not | |
| | I | | ubj | out to onset? | Debts to pension or profit-s | haring | nlans a | and other simi | ar dehts | |
| | _ · | | | | ■ Other. Specify Overpay | · | | | ai dobio | |
| | _ | res | | | Other. Specify Overpay | /111611 | t of be | - I CIII | | |
| Part 3: | | List Othe | ers t | o Be Notified About a De | ebt That You Already Listed | | | | | |
| 5. Use th is tryir have n notifie | is pa ng to nore ed for | age only if collect fr than one r any deb | f yo | u have others to be notified you for a debt you owe to s | about your bankruptcy, for a debt to omeone else, list the original credit at you listed in Parts 1 or 2, list the or submit this page. | tor in F additi | Parts 1 onal cre | or 2, then list editors here. | arts 1 or 2. For example, if a collecti the collection agency here. Similar f you do not have additional persor | ly, if you |
| Name ar Firstso | | ^{ddress} e Advan | itac | e. LLC | On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>): | · | | • | ? Priority Unsecured Claims | |
| | | nt Woods | | | Line 111 of Conditions. | | | | Nonpriority Unsecured Claims | |
| Buffalo |), N` | Y 14228 | 3 | | Last 4 digits of account number | | 1 411 2. 1 | orcanors with | volipholity offsecured chairing | |
| Name ar | | | | | On which entry in Part 1 or Part 2 did | | | • | | |
| Firstso PO BC | | e Advan | ıtag | e, LLC. | Line 4.1 of (Check one): | | | | Priority Unsecured Claims | |
| | |)20 Y 14240 |) | | | | Part 2: (| Creditors with | Nonpriority Unsecured Claims | |
| | • | | | | Last 4 digits of account number | | | | | |
| Name ar | nd Ad | ddress | | | On which entry in Part 1 or Part 2 did | d you li | ist the o | riginal creditor | ? | |
| | | | | nistration | Line 4.8 of (Check one): | | | | Priority Unsecured Claims | |
| | | . Abrana ım, AL 3 | | Woods, Jr. Blvd 35-0001 | | | Part 2: (| Creditors with | Nonpriority Unsecured Claims | |
| , | J | , | | | Last 4 digits of account number | | | | | |
| Name ar | | | | | On which entry in Part 1 or Part 2 did | d you li | ist the o | riginal creditor | ? | |
| | | | | nistration | Line 4.8 of (Check one): | | Part 1: (| Creditors with | Priority Unsecured Claims | |
| | | ottage G IL 60637 | | e Avenue | | | Part 2: (| Creditors with | Nonpriority Unsecured Claims | |
| Ornoag | jO, 1 | IL 00037 | | | Last 4 digits of account number | | | | | |
| Name ar | nd Ad | ddress | | | On which entry in Part 1 or Part 2 did | d vou li | ist the o | riginal creditor | ? | |
| Social | Sec | curity Ad | | nistration | Line 4.8 of (Check one): | · — | | • | Priority Unsecured Claims | |
| | | | | Service Ctr. | | | Part 2: 0 | Creditors with | Nonpriority Unsecured Claims | |
| | | adison S IL 60661 | | 174 | | | | | | |
| | ,-, - | | _ | | Last 4 digits of account number | | | | | |
| Dord 4 | | A .1.1 (1) | A | | | | | | | |
| Part 4: | | | | ounts for Each Type of U | | | | | | |
| | | amounts o secured c | | | ums. This information is for statisti | cai re | porting | purposes on | y. 28 U.S.C. §159. Add the amounts | tor each |
| | | | | | | | | 1 | otal Claim | |
| | | 6a | ı. I | Domestic support obligation | s | | 6a. | \$ | 0.00 | |
| | Total aims | | | | | | | | | |
| from Pa | | |). - | Taxes and certain other deb | ts you owe the government | | 6b. | \$ | 0.00 | |
| | | 6c | | | injury while you were intoxicated | | 6c. | \$ | 0.00 | |
| | | 6d | 1. (| תופר. Add all other priority un | secured claims. Write that amount he | ıe. | 6d. | \$ | 0.00 | |

Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Case 16-21779 Page 22 of 49 Case number (if know) Document

Debtor 1 Robert H Jenkins

| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
|--------------|-----|---------------------------------------------------------------------------------------------------------|-----|-----------------|
| | 0,1 | • • • | ۰, | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 81,731.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 81,731.00 |

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|-----------------------------|-------------------|-------------|--|
| Debtor 1 | Robert H Jenkins First Name | Middle Name | Last Name | |
| Debtor 2 | i iist ivaine | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| 2.1 Killernan Group, LLC 8155 Ogden Ave Lyons, IL 60534 | Apartment Lease |

| | | Docume | ent Page 24 d | า 49 | |
|--------------------------------|--------------------------------------------------------------------|------------------------------------------------------|---------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------|
| Fill in this | information to identify your | | | | |
| Debtor 1 | Robert H Jenkins | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | , , | | | | |
| Case numb (if known) | oer | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | l Form 106H | | | | |
| | lule H: Your Cod | ebtors | | | 12/15 |
| 50110 4 | dio III. I odi oca | obtoro | | | 12/13 |
| ill it out, ar | nd number the entries in the and case number (if known | boxes on the left. Attach . Answer every question | the Additional Page t | to this page. On the to | needed, copy the Additional Page, p of any Additional Pages, write |
| 1. 00) | you have any codebtors? (If | you are filing a joint case, | do not list eitner spouse | e as a codeptor. | |
| ■ No □ Yes | | | | | |
| Arizona | a, California, Idaho, Louisiana | | | | ty states and territories include |
| | Go to line 3. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | , , | 3 | , | | |
| in line Form | 2 again as a codebtor only | f that person is a guaran | tor or cosigner. Make | sure you have listed t | ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D, lin | ne |
| | Name | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lir | ne |
| | Number Street | _ | | <u> </u> | |
| (| City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, lin | na |
| | Name | | | Schedule E/F, | |
| | | | | ☐ Schedule G, lin | |
| 1 | Number Street | | | _ | |
| (| City | State | ZIP Code | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 25 of 49

| | | | | | | _ | | | | |
|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------|---------------------|----------------|-------------------|---------------------------------------|---------------------------|------------------------------|-----------------|
| Fill | in this information to identify your ca | ase: | | | | | | | | |
| Del | otor 1 Robert H Jer | nkins | | | _ | | | | | |
| | otor 2 buse, if filing) | | | | _ | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | | |
| | se number | | - | | | □ Ai | k if this is: n amende suppleme | ed filing | g postpetition | chapter |
| \bigcirc | fficial Forms 4001 | | | | | 13 | 3 income | as of the fo | ollowing date: | |
| | fficial Form 106l chedule I: Your Inc | | | | | M | M / DD/ Y | /YYY | | 12/1 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment | are married and not filing w | ng jointly, and your ith you, do not inclu | spouse ude infor | is liv mati | ing with on about | you, incluyour spo | ude inforn ouse. If mo | nation about ore space is | your needed, |
| 1. | Fill in your employment information. | Il in your employment | | Debtor 1 | | | | | ling spouse | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | ■ Employed | | | | | | |
| | information about additional | | ☐ Not employed | | ☐ Not employed | | | | | |
| | employers. | Occupation | Truck Driver | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | KLLM Transport | Service | es | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 135 Riverview D Richland, MS 39 | | | | | | | |
| | | How long employed t | here? 4 Years | S | | | _ | | | |
| Par | Give Details About Mor | nthly Income | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to | report for | any | line, write | \$0 in the | space. Inc | clude your noi | n-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | on for all | empl | oyers for t | that perso | on on the li | nes below. If | you need |
| | | | | | | For Deb | tor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 5, | 633.33 | \$ | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ | 5,63 | 33.33 | \$ | N/A | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 26 of 49

| Deb | otor 1 | Robert H Jenkins | _ | Ca | ase ni | umber (if known) | | | | | | |
|---------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------|----------|------------------|---|---------------|------|-----------------|------|------|
| | | | | F | or D | ebtor 1 | | For Deb | | | | |
| | Cop | y line 4 here | 4. | 9 | <u> </u> | 5,633.33 | | \$ | 9 - | N/A | _ | |
| 5. | List | all payroll deductions: | | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | . 9 | 3 | 1,902.85 | | \$ | | N/A | | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | | 86.45 | | \$ | | N/A | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | | 0.00 | | \$ | | N/A | _ | |
| | 5d. | Required repayments of retirement fund loans | 5d. | | | 0.00 | | \$ | | N/A | _ | |
| | 5e. | Insurance | 5e. | | | 389.74 | | \$ | | N/A | _ | |
| | 5f. | Domestic support obligations | 5f. | , | | 0.00 | | \$ | | N/A | _ | |
| | 5g. | Union dues | 5g. | , | | 0.00 | | <u>\$</u> | | N/A | _ | |
| | 5h. | Other deductions. Specify: Legal | 5h. | | | 19.41 | + | \$ | | N/A | _ | |
| 6 | | | _ | \$ | | | | : | | - | - | |
| 6. - | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | | 2,398.45 | | \$ | | N/A | - | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | | 3,234.88 | | \$ | | N/A | - | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 90 | | | 0.00 | | ¢ | | NI/A | | |
| | 8b. | monthly net income. Interest and dividends | 8a. 8b. | | | 0.00 | | \$ | | N/A | _ | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | 0.00 | | \$ | | N/A | - | |
| | 04 | | 8d. | | | 0.00 | | \$ | | N/A | _ | |
| | 8d. 8e. | Unemployment compensation Social Security | 8e. | 1 | | 0.00 | | \$ | | N/A N/A | _ | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | 9 | | 0.00 | | \$ | | N/A | _ | |
| | 8g. | Pension or retirement income | 8g. | . 9 | S | 0.00 | | \$ | | N/A | _ | |
| | 8h. | Other monthly income. Specify: | 8h. | + \$ | <u> </u> | 0.00 | + | \$ | | N/A | _ | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | | \$ | | N// | A | |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 3 | 234.88 + \$ | | - N | I/A | - \$ | 3,23 | / QQ |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _ | - 0, | 204.00 | | | // (| | 0,20 | 4.00 |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | r depe | | | | • | in Sche | dule | | (| 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | fit | 12. | \$ | 3,23 | 4.88 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | 1? | | | | | | | Combi monthl | | me |
| | | No. | | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 27 of 49

| Fill | in this informa | tion to identify yo | our case: | | | | | | | |
|-----------|--------------------------------------------------|-------------------------------------------------------|------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------|-----------|---------|-----------------|-------------------------------|-------|
| Deb | tor 1 | Robert H Jen | ıkins | | | Ch | neck if | this is: | | |
| | | | | | | | | amended filing | | |
| | otor 2 | | | | | | | | ving postpetition ch | apter |
| (Spc | ouse, if filing) | | | | | | 13 | expenses as or | the following date: | |
| Unit | ed States Bankr | uptcy Court for the | : NORTH | ERN DISTRICT OF ILLIN | OIS | | MN | // DD / YYYY | | |
| l | e number nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | |
| S | chedule | J: Your | Exner | 1606 | | | | | | 12/15 |
| Be info | as complete a ormation. If m mber (if know | and accurate as lore space is ne n). Answer eve | s possible. eded, atta ry question | . If two married people ar ich another sheet to this | | | | | | ct |
| Par 1. | t 1: Descr Is this a joir | ibe Your House | hold | | | | | | | |
| | | | | | | | | | | |
| | ■ No. Go to | | in a conar | ate household? | | | | | | |
| | | | iii a sepai | ate nousenolu: | | | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | hold of D | ebtor | 2. | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | _ | Dependent's age | Does dependent live with you? | |
| | Do not state | the | | | | | | | □ No | • |
| | dependents | names. | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| _ | _ | | | | | | | | ☐ Yes | |
| 3. | | oenses include | han \blacksquare | No | | | | | | |
| | | f people other t d your depende | | Yes | | | | | | |
| | youroon and | a your aoponao | | | | | | | | |
| exp | imate your ex | | our bankrı | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | | | |
| | | | | government assistance it | | | | | | |
| | ficial Form 10 | | a nave me | nadea it on ocheane i. 1 | our moome | | _ | Your expe | enses | |
| 4. | | or home owners and any rent for th | | ses for your residence. In or lot. | nclude first mortgage | 4. | \$_ | | 1,000.00 | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | 4b. Prope | rty, homeowner's | s, or renter | 's insurance | | 4b. | \$ | | 0.00 | |
| | | | | upkeep expenses | | 4c. | | | 0.00 | |
| | | owner's associat | | | | 4d. | | | 0.00 | |
| 5. | Additional r | nortgage payme | ents for vo | our residence, such as hor | me equity loans | 5. | \$ | | 0.00 | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 28 of 49

| Debt | or 1 Robert H Jenkins Ca | ase num | nber (if known) | |
|------|--------------------------------------------------------------------------------------------------------|-----------|-----------------|--------------------------|
| 6. | Utilities: | | | |
| J. | 6a. Electricity, heat, natural gas | 6a. | \$ | 250.00 |
| | 6b. Water, sewer, garbage collection | 6b. | | 75.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | · - | 125.00 |
| | 6d. Other. Specify: Cable | 6d. | · - | 75.00 |
| 7. | Food and housekeeping supplies | - 7. | · | |
| | . • | 7. 8. | · | 349.88 |
| 8. | Childcare and children's education costs | | · | 0.00 |
| | Clothing, laundry, and dry cleaning | 9. | · | 50.00 |
| | Personal care products and services | 10. | · · | 40.00 |
| | Medical and dental expenses | 11. | \$ | 100.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ | 290.00 |
| 13 | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | Charitable contributions and religious donations | 14. | · | 0.00 |
| | Insurance. | 14. | Ψ | 0.00 |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 0.00 |
| | 15b. Health insurance | 15b. | · | 0.00 |
| | 15c. Vehicle insurance | 15c. | · - | 110.00 |
| | 15d. Other insurance. Specify: | 15d. | | |
| 6 | · · · | _ 130. | Ψ | 0.00 |
| 0. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| 17. | Installment or lease payments: | _ | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ | 285.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. Other. Specify: | 17c. | \$ | 0.00 |
| | 17d. Other. Specify: | _ 17d. | \$ | 0.00 |
| | Your payments of alimony, maintenance, and support that you did not report as | | · - | |
| | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | 19. | | |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedu | | | |
| | 20a. Mortgages on other property | 20a. | \$ | 0.00 |
| | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | | 0.00 |
| 21. | Other: Specify: | | +\$ | 0.00 |
| | | | . * | 0.00 |
| 22. | Calculate your monthly expenses | | | |
| | 22a. Add lines 4 through 21. | | \$ | 2,749.88 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,749.88 |
| 22 | Calculate your monthly not income | | | |
| ۷٥. | Calculate your monthly net income. | 22- | ¢. | 0.004.00 |
| | 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 3,234.88 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 2,749.88 |
| | 23c. Subtract your monthly expenses from your monthly income. | | | 405.00 |
| | The result is your monthly net income. | 23c. | \$ | 485.00 |
| 24. | Do you expect an increase or decrease in your expenses within the year after you | file this | s form? | |
| | For example, do you expect to finish paying for your car loan within the year or do you expect your mo | | | or decrease because of a |
| | modification to the terms of your mortgage? | | | |
| | ■ No. | | | |
| | Yes. Explain here: | | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 29 of 49

| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------------|----------------------------------------------|--------------------------|--------------------------|-------------------------|--------------------------------------------------------------------------|
| Debtor 1 | Robert H Jenkins | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| Declara | tion About a | n Individual | Debtor's So | chedules | 12/15 |
| obtaining mone years, or both. 1 | | connection with a bank | | | ment, concealing property, or 0, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attori | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | rruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| | alty of perjury, I declare true and correct. | that I have read the sum | mary and schedules fil | ed with this declaratio | n and |
| X /s/ Rob | pert H Jenkins | | X | | |
| | t H Jenkins ire of Debtor 1 | | Signature o | of Debtor 2 | |

Date _____

Date July 6, 2016

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 30 of 49

| Fil | l in this inform | ation to identify you | r case: | | | |
|-----|---------------------------|-----------------------------------------------------------|----------------------------------------------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------|
| De | btor 1 | Robert H Jenkins | | | | |
| Do | btor 2 | First Name | Middle Name | Last Name | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Bar | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Ca | se number | | | | | |
| | nown) | | | | - | Check if this is an mended filing |
| | fficial For | | | | | |
| St | atement | of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/10 |
| nur | rt 1: Give D |). Answer every que | stion. Irital Status and Where You | | y additional pages, write yo | ar Haine and Case |
| | . | | | | | |
| | ■ Married □ Not marr | ried | | | | |
| 2 | | | lived enveybore other then | where you live new? | | |
| 2. | During the la | ist 3 years, have you | lived anywhere other than | where you live now? | | |
| | □ No | | | | | |
| | Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live nov | I. | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| | 8151 S Cal Chicago, IL | | From-To: 06/2010 to 09/2015 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: |
| Pa | No Yes. Mal | es include Arizona, Ca ke sure you fill out <i>Scl</i> | lifornia, Idaho, Louisiana, Ne nedule H: Your Codebtors (O | vada, New Mexico, Puerto R | ity property state or territor ico, Texas, Washington and V | Visconsin.) |
| 4. | Fill in the total | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$35,200.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Page 31 of 49
Case number (if known) Debtor 1 Robert H Jenkins

| | | | | Debtor 1 | | | | | Debtor 2 | | |
|-----------|-----------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------|------------|-------------------------------------------------|------------------------------------------|------------------------------------------------------------------------|
| | | | | Sources of in Check all that | | (befor | s income re deductions sions) | and | Sources of Check all tha | | Gross income (before deductions and exclusions) |
| | r last calen anuary 1 to | dar year: December : | 31, 2015) | ■ Wages, co | • | | \$69,68 | 3.00 | ☐ Wages, o | ommissions, | |
| | | | | ☐ Operating | a business | | | | ☐ Operating | g a business | |
| | | dar year bef December : | | ■ Wages, co | | | \$68,52 | 0.00 | ☐ Wages, o | ommissions, | |
| | | | | ☐ Operating | a business | | | | ☐ Operating | g a business | |
| | winnings. List each s | f you are fili | ng a joint cas | e and you have | e income that yo | u recei | ved together, | list it on | ly once under | Debtor 1. | ind gambling and lotter |
| | | | | Dahtan 4 | | | | | Dahtan 0 | | |
| | | | | Debtor 1 Sources of ir Describe belo | | each (befor | s income from source re deductions sions) | | Debtor 2 Sources of Describe be | | Gross income (before deductions and exclusions) |
| Pa | rt 3: List | Certain Pa | yments You | Made Before | You Filed for B | ankrup | otcy | | | | |
| 3. | Are either ☐ No. | Neither De individual puring the No. | ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include | personal, family personal, family re you filed for ach creditor to editor. Do not in payments to ar | ly, or household bankruptcy, did whom you paid | ner dek purpos you pa a total s for do s bankr | ots. Consume se." y any creditor of \$6,425* or mestic suppo ruptcy case. | more in | of \$6,425* or one or more tions, such as | more? payments and s child support | 01(8) as "incurred by a the total amount you and alimony. Also, do nt. |
| | ■ Yes. | Debtor 1 o | r Debtor 2 o | r both have pr | imarily consun bankruptcy, did | ner deb | ots. | | | | |
| | | ■ No. | Go to line 7 | | | | | | | | |
| | | □ Yes | include pay | | estic support obl | | | | | | at creditor. Do not t include payments to a |
| | Creditor' | s Name and | I Address | Da | ates of paymen | t | Total amo | unt aid | Amount you | | payment for |

Page 32 of 49
Case number (if known) Debtor 1 Robert H Jenkins

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No | | | | | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------|----------------------|----------------------------|------------------------------|--|--|--|--|
| | ☐ Yes. List all payments to an insider. | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | | |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an | | | | |
| | ☐ Yes. List all payments to an insider | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name | | | | |
| Pai | t 4: Identify Legal Actions, Repossession | ns. and Foreclosures | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case | | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, t | foreclosed, garnis | hed, attached | d, seized, or levied? | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | | | | |
| | | Explain what happened | I | | property | | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details. | | luding a bank or fi | nancial institution | , set off any a | amounts from your | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | action was | Amount | | | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes | | erty in the possess | | | efit of creditors, a | | | | |
| Pai | t 5: List Certain Gifts and Contributions | | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | otcy, did you give any gifts | s with a total value | of more than \$60 | 0 per person | ? | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |

Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36

Case 16-21779 Desc Main Page 33 of 49 Case number (if known) Document Debtor 1 Robert H Jenkins 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You STAHULAK & ASSOCIATES, L.L.C \$1,325.00 (\$310.00 filing fee + \$33.00 06/22/2016 \$1,325.00 53 W. Jackson Blvd., Suite 652 credit report + \$10.00 copy + \$972.00 Chicago, IL 60604 attys fees) Green Path Debt Solutions 06/22/2016 \$25.00 \$25.00 Credit Counseling 38505 Country Club Drive Farmington, MI 48331

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer **Address** Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Case 16-21779 Page 34 of 49 Case number (if known) Document

Debtor 1 Robert H Jenkins

| 19. | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-production No | | ny property to a | a self-settle | ed trust or similar device | ∍ of which yo | ou are a | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------|---------------|------------------------------------------------------|------------------|--------------------------------------|--|
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Name of trust | Description and | value of the pro | perty trans | sferred | Date Tran | isfer was | |
| Pa | rt 8: List of Certain Financial Accounts, Ins | truments, Safe Depos | it Boxes, and S | torage Unit | ts | | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details. | r other financial accou | unts; certificate: | s of deposi | | • | , | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number Type of ac instrument | | ount or | Date account was closed, sold, moved, or transferred | | st balance closing or transfer | |
| 21. | Do you now have, or did you have within 1 yeash, or other valuables? | ear before you filed fo | or bankruptcy, a | ny safe de | posit box or other depo | sitory for sec | curities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | Do you have it | | |
| 22. | Have you stored property in a storage unit o No Yes. Fill in the details. | r place other than you | ır home within 1 | l year befo | re you filed for bankrup | tcy? | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | Do you have it | | |
| Pa | rt 9: Identify Property You Hold or Control f | for Someone Else | | | | | | |
| 23. | Do you hold or control any property that son for someone. | neone else owns? Inc | lude any prope | rty you bor | rowed from, are storing | for, or hold | in trust | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, | | Describe | the property | | Value | |
| Pa | rt 10: Give Details About Environmental Info | Code) | | | | | | |
| | the purpose of Part 10, the following definition | | | | | | | |
| | Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these | e air, land, soil, surfac | ce water, groun | • . | | | | |
| | Site means any location, facility, or property to own, operate, or utilize it, including dispos | | environmental | law, wheth | ner you now own, opera | te, or utilize i | it or used | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, | | | | | | | |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Page 35 of 49 Case number (if known) Document

Debtor 1 Robert H Jenkins

| 24. | Has any governmental unit notified you that y | ou may be liable or potentially liable u | nder or in violation of an environm | ental law? | | | | | |
|-----|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------|--------------------|--|--|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 25. | Have you notified any governmental unit of a | ny release of hazardous material? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 26. | Have you been a party in any judicial or admi | nistrative proceeding under any enviro | onmental law? Include settlements | and orders. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | | |
| Par | 11: Give Details About Your Business or Co | onnections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing exec | cutive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voting | or equity securities of a corporation | | | | | | | |
| | ■ No. None of the above applies. Go to Pa | rt 12. | | | | | | | |
| | ☐ Yes. Check all that apply above and fill ir | the details below for each business. | | | | | | | |
| | | Describe the nature of the business | Employer Identification numbe | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not include Social Security Dates business existed | number of ITIN. | | | | | |
| 28. | Within 2 years before you filed for bankruptcy institutions, creditors, or other parties. | , did you give a financial statement to | anyone about your business? Incl | ude all financial | | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | | | | | |
| | | | | | | | | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Document

Page 36 of 49 Case number (if known) Debtor 1 Robert H Jenkins Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert H Jenkins Signature of Debtor 2 Robert H Jenkins

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No ☐ Yes

Signature of Debtor 1 Date July 6, 2016

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee | |
|---|-------|--------------------|--|
| + | \$75 | administrative fee | |
| | \$310 | total fee | |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Debtor's attorney received \$1,325.00 from Debtor(s) prior to filing of the case as an advanced payment in compensation of (1) analysis of financial situation; (2) consultation on various bankruptcy and non-bankruptcy options; (3) preparation of documents; (4) payment of filing fees; and, when applicable (5) payment of costs of credit report fees.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received , $\$\underline{972.00}$

toward the flat fee, leaving a balance due of \$3,028.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:July_6, 2016 | | | |
|-------------------------------------------|----------------------------|--|--|
| Signed: | | | |
| /s/ Robert H Jenkins | /s/ Thomas G. Stahulak | | |
| Robert H Jenkins | Thomas G. Stahulak 6288620 | | |
| | Attorney for the Debtor(s) | | |
| | _ | | |
| Debtor(s) | | | |
| Do not sign this agreement if the amounts | are blank. | | |
| 5 5 | Local Bankruptcy Form 23c | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 46 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In r | re Robert H Jenkins | | Case No. | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------|-------------------------------------|--|
| | | ebtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPENSATION | OF ATTORNEY | FOR DE | BTOR(S) | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rebe rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | to me, for services rendered or to | |
| | For legal services, I have agreed to accept | \$ | | 4,000.00 | |
| | Prior to the filing of this statement I have received | | | 972.00 | |
| | Balance Due | \$ | | 3,028.00 | |
| 2. | \$310.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm | | | pers and associates of my law firm. | |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal ser | vice for all aspects of the b | ankruptcy ca | ase, including: | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. | | | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not inconsequently an adversary proceeding. | lude the following service: ctions, judicial lien avoida | inces, relie | f from stay actions or any other | |
| | CERTIFICATION | | | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | | |
| July 6, 2016 /s/ Thomas G. Stahulak | | | | | |
| Date Thomas G. Stahulak 6288620 | | | | | |
| Signature of Attorney Stahulak & Associates, L.L.C. / GetFiled | | | | led | |
| | | B W. Jackson Blvd., Suite | | Cu | |
| | Ch | nicago, IL 60604 | | | |
| | | 12) 662-1480 Fax: (312) | | | |
| | | f@stahulakandassociate time of law firm | s.com | | |
| 1 | TVC | ine oj iuw jirni | | | |

Case 16-21779 Doc 1 Filed 07/06/16 Entered 07/06/16 14:37:36 Desc Main Document Page 47 of 49

United States Bankruptcy Court Northern District of Illinois

| In re | Robert H Jenkins | | Case No. | | |
|-------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------|----|--|
| | | Debtor(s) | Chapter | 13 | |
| | VERIFICATION OF CREDITOR MATRIX | | | | |
| | Number of Creditors:1 | | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | |
| Date: | July 6, 2016 | /s/ Robert H Jenkins Robert H Jenkins Signature of Debtor | | | |

Amex Correspondence Po Box 981540 El Paso, TX 79998

Barclays Bank Delaware Po Box 8801 Wilmington, DE 19899

Capital One Po Box 30285 Salt Lake City, UT 84130

Crdt Union 1 450 E. 22nd St. Suite 250 Lombard, IL 60148

Credit Union 1 Attn:Bankruptcy/Member Services 200 E Champaign Ave Rantoul, IL 61866

Discover Financial Po Box 3025 New Albany, OH 43054

Firstsource Advantage, LLC 205 Bryant Woods South Buffalo, NY 14228

Firstsource Advantage, LLC. PO BOX 628
Buffalo, NY 14240

Merrick Bank/Geico Card Po Box 23356 Pittsburg, PA 15222

Prosper Marketplace Inc Po Box 396081 San Francisco, CA 94139

Social Security Administration P.O. Box 3430 Philadelphia, PA 19122

Social Security Administration 1200 Rev. Abraham Woods, Jr. Blvd Birmingham, AL 35285-0001

Social Security Administration Great Lakes Program Service Ctr. 600 W. Madison St. Chicago, IL 60661-2474

Social Security Administration 6338 S Cottage Grove Avenue Chicago, IL 60637